24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Our Principles PAC	C C00603621
Check if \times 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
DDC Advocacy	01 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 805 15th Street, N.W.	Amount
Suite 300	
City State Zip Code Washington DC 20005	28093.86 Transaction ID : SE.4146
	Date of Disbursement or Obligation
Purpose of Expenditure Direct mail services Category/ Type	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Donald L Trump	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbur 2016	rsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
DDC Advocacy	01 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 805 15th Street, N.W.	Amount
Suite 300	
City State Zip Code	77462.88
Washington DC 20005	Transaction ID : SE.4152 Date of Disbursement or Obligation
Purpose of Expenditure Direct mail services Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Donald I Trump	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	
(a) SEPTETAL OF REINIZED INDEPENDENT EXPENDITURES.	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Jamie Jodoin [Electronically Filed] Date 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	